
Re: Environmental Tobacco Smoke, Genetic Susceptibility, and Risk of Lung Cancer in Never-Smoking Women

Bennett et al. (1) report that never-smoking Missouri women who report exposure to environmental tobacco smoke (ETS) and develop lung cancer are more likely to be deficient in GSTM1 activity (GSTM1 null genotype) compared with never smokers who had no ETS exposure and developed lung cancer (odds ratio [OR] = 2.6; 95% confidence interval [CI] = 1.1–6.1). It is further concluded that “For the half of the population of never-smoking women with the GSTM1 null polymorphism, ETS exposure is responsible for between 42% and 49% of the lung cancer cases.”

Yet in an accompanying editorial, Weinberg and Sandler (2) comment: “Clearly, many questions remain, and the reported interaction (1) between

GSTM1 and ETS requires confirmation.” They also point out that an OR of 2.6 for the association of ETS exposure with lung cancer in GSTM1 null non-smoking women suggests a relative risk of at least 1.7 for the association of ETS with lung cancer in nonsmoking women, which is inconsistent with generally accepted estimates (3), including the reported OR of 1.1 (95% CI = 0.8–1.3) for Missouri women (4).

The International Agency for Research on Cancer has investigated genetic polymorphisms of GSTM1 and GSTT1 in nonsmokers and their interaction with exposure to ETS in a multicenter case-control study of 115 non-smoking lung cancer case subjects, in 177 smoking lung cancer case subjects, and in 109 nonsmoking hospital or population control subjects (5). The GSTM1 null genotype was not associated with risk of lung cancer in non-smokers (OR = 0.97; 95% CI = 0.55–1.72) and with a modest, not statistically significant, increase in risk in smokers (OR = 1.70; 95% CI = 0.71–4.05). GSTT1 null genotypes were associated with decreased risk in both nonsmokers (OR = 0.65; 95% CI = 0.35–1.19) and smokers (OR = 0.92; 95% CI = 0.34–2.48). Nonsmoking case subjects experienced higher levels of ETS exposure than control subjects. It was concluded that “These results do not suggest a role of GST M1 or T1 polymorphisms as modifying factors of lung cancer risk due to ETS exposure in nonsmokers.”

Further, Nyberg et al. (6), in a study of 185 male and female nonsmoking and smoking lung cancer patients and 164 frequency-matched population control subjects, reported an overall OR for lung cancer associated with the GSTM1 null genotype of 0.8 (95% CI = 0.5–1.2), with an OR close to unity among ever smokers (OR = 0.9; 95% CI = 0.4–1.9) and lower among never smokers (OR = 0.6; 95% CI = 0.3–1.1). The risk of lung cancer was almost identical among never smokers reporting exposure to ETS from the spouse or at work during the last 10 years before diagnosis (OR = 0.7; 95% CI = 0.2–1.9) and those reporting no exposure to ETS (OR = 0.6; 95% CI = 0.2–1.0).

Clearly, epidemiologic approaches that use either case-only (1) or case-control (5,6) designs differ, making it hard to conclude whether individuals with germline polymorphisms in genes

for enzymes that detoxify environmental genotoxins are at increased risk of lung cancer due to exposure to ETS.

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Editor's note: A. R. Tricker is employed by the tobacco industry.

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RESPONSE

Tricker's only valid criticism cites two negative studies (1,2) to refute our observation (3). Although the discrepancy is unexplained, early reports often conflict, and differences are usually reconciled by environmental, genetic, and lifestyle factors. For example, α -tocopherol supplements may compensate for deficient GSTM1 activity (4), and dietary habits are known to modify risks of lung cancer. Therefore, culinary preferences might explain the discordant results, because our analyses (3) were adjusted for dietary intakes of fruits and vegetables, but those of Nyberg et al. (2) were not. [The abstract report by Malats et al. (1) cannot be assessed on this point.] Furthermore, gene-gene interactions between GSTM1 and CYP1A1

modulate risks in Japanese smokers [reviewed in (5)], and similar interactions among different genes are likely to occur in Caucasian nonsmokers.

Tricker attacks our point estimate of the interaction odds ratio (OR) for GSTM1 deletion and environmental tobacco smoke exposure by use of a misleading partial quotation from the editorial by Weinberg and Sandler (6). He misrepresents a paragraph in which they begin with the question, "How credible is this number?" (i.e., OR = 2.6), consider two sets of assumptions and analytic approaches, and conclude with "the confidence interval provided . . . for the interaction estimate of 2.6 *does* [emphasis in the original] include numbers as low as this [1.36], which is reassuring."

Tricker asserts that our findings require corroboration, and we fully agree that "additional studies are needed to confirm these observations," as stated in our report (3). Tricker summarizes his criticisms by declaring "it [is] hard to conclude whether individuals with germline polymorphisms in genes for enzymes that detoxify environmental genotoxins are at increased risk of lung cancer due to exposure to ETS [environmental tobacco smoke]." We agree that these studies are technically demanding. In fact, recognizing that "even small er-

rors in the assessment of environmental or genetic factors can result in biased interaction parameters and substantially increased sample requirements" (7), corroboration of an effect linking GSTM1, environmental tobacco smoke, and risk of lung cancer will require substantially larger studies with detailed assessments of exposure and potentially confounding factors.

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NOTES

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